

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. K6510.0064/P064	
		First Inventor Yoshifumi Ishihata	
		Title CONTROL PROGRAM FOR ACTION GAME	Express Mail Label No. _____
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small></p><p>2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small></p><p>3. <input checked="" type="checkbox"/> Specification [Total Pages 37] <small>(preferred arrangement set forth below)</small><ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure</p><p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 11]</p><p>5. Oath or Declaration [Total Sheets _____]<div style="margin-left: 20px;"><p>a. <input type="checkbox"/> Newly executed (original or copy)</p><p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small></p><p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></p></div></p><p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p></div><div style="width: 48%;"><p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p><p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)<div style="margin-left: 20px;"><p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p><p>b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper</p><p>c. <input type="checkbox"/> Statements verifying identity of above copies</p></div></p></div></div>		ACCOMPANYING APPLICATION PARTS	
		<div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p><p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></p><p>11. <input type="checkbox"/> English Translation Document (if applicable)</p><p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p><p>13. <input type="checkbox"/> Preliminary Amendment</p><p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small></p><p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></p><p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). <small>Applicant must attach form PTO/SB/35 or its equivalent.</small></p><p>17. <input checked="" type="checkbox"/> Other: Claim for Priority</p></div><div style="width: 48%;"></div></div>	
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____</p> <p>Prior application information: Examiner _____ Art Unit: _____</p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>			
19. CORRESPONDENCE ADDRESS			
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><p><input checked="" type="checkbox"/> Customer Number: 24998</p></div><div style="width: 50%;"><p><input checked="" type="checkbox"/> Correspondence address below</p></div></div>			
Name		DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP	
		Thomas J. D'Amico	
Address		2101 L Street NW	
City	Washington	State	DC
Country	US	Zip Code	20037-1526
	Telephone	(202) 785-9700	Fax (202) 887-0689
Name (Print/Type)		Registration No. (Attorney/Agent)	28,371
Signature		Date	November 26, 2003

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1201	86	2201	43	Independent claims in excess of 3																																																																																																																																																																																																											
1203	290	2203	145	Multiple dependent claim, if not paid																																																																																																																																																																																																											
1204	86	2204	43	** Reissue independent claims over original patent																																																																																																																																																																																																											
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent																																																																																																																																																																																																											
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Name (Print/Type) Thomas J. D'Amico				Registration No. (Attorney/Agent) 28,371		(Complete if applicable)																																																																																																																																																																																																									
Signature				Telephone (202) 828-2232		Date November 26, 2003																																																																																																																																																																																																									